

ABSTRACT

A STUDY OF MENTAL ILLNESSES IN NEWLY DIAGNOSED HYPOTHYROIDISM IN RELATION TO PREVALENCE, CLINICAL FEATURES, QUALITY OF LIFE, GENDER DIFFERENCE AND STRESSFUL LIFE EVENTS

AIM: A study of mental illnesses in newly diagnosed hypothyroidism in relation to prevalence, clinical features, quality of life, gender difference and stressful life events.

OBJECTIVES:

1. To study the prevalence of Psychiatric illnesses among patients with newly diagnosed Hypothyroidism.
2. To assess the quality of life in patients of hypothyroidism with mental illness.
3. To differentiate the clinical features of psychiatric illnesses between males and females with Hypothyroidism.
4. To study the gender difference of suicidal risk in patients with mental illnesses and Hypothyroidism.
5. To find out the relationship of stressful life events with mental illnesses among Hypothyroidism patients.

METHODOLOGY:

Consecutive patients between 20-50 years of age attending Endocrinology OPD, Government Rajaji Hospital, diagnosed with Hypothyroidism. Of the patients evaluated during the study period of 6 months, 53 consecutive patients were selected who met the criteria for Hypothyroidism based on ICD 10. These patients were assessed using MINI, Hospital Anxiety and Depression Scale, Presumptive stressful life events scale, Beck's Scale for Suicide Ideation and WHO Quality Of Life. The collected data were subjected to statistical analysis.

RESULTS

Major depressive disorder is the most common Psychiatric comorbidity associated with Hypothyroidism. Advancing age increases the risk of developing comorbid Psychiatric illness. Female patients suffering from Hypothyroidism have more Psychiatric illness than male patients suffering from hypothyroidism. Patients with more number of Stressful life events are prone to develop Psychiatric comorbidities. Increase in Psychiatric comorbidity increases the suicidal risks. Patients with Major Depression have experienced more number of Stressful Life Events as compared to other disorders, like Generalised Anxiety Disorder, Mixed Anxiety and Depression, Dysthymia or Psychosis. The Quality of Life in patients with Hypothyroidism is worsened by comorbid Psychiatric illness. The presence of comorbid Depression contributed more to poor the Quality of Life.

CONCLUSION

Early recognition and treatment of Psychiatric illness would be better recognised in future and this exploration of research would also be further extended into the management aspects in forthcoming years.

Keywords: Hypothyroidism, Comorbidity, Quality of life.